

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)

031673-003000

CERTIFICATE OF MAILING OR  
TRANSMISSION  
[37 CFR 1.8(a)]

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop \_\_\_\_\_, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or being facsimile transmitted to the USPTO at \_\_\_\_\_, on \_\_\_\_\_

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

In re Application of **Thomas R. KOZEL**

Application Number **10/809,831**

Filed **03/26/2004**

For **COMPOSITIONS AND METHODS FOR DETECTION, PREVENTION, AND TREATMENT OF ANTHRAX AND OTHER INFECTIOUS DISEASES**

Group Art Unit **1645**

Examiner **SWARTZ, Rodney P.**

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate entity fee are as follows (check time period desired):

- |   |               |
|---|---------------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120)                 | \$ _____      |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$230/\$460)               | \$ _____      |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$525/\$1050) | <b>\$1050</b> |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$820/\$1640)             | \$ _____      |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1115/\$2230)            | \$ _____      |

☐ Applicant claims small entity status.

☐ A check to cover the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 19-2380.  
I have enclosed a duplicate copy of this sheet.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

I am the ☐ applicant/inventor

☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record.

☐ attorney or agent under 37 CFR 1.34(a).  
Registration number if acting under 37 CFR 1.34(a) \_\_\_\_\_.

/Jeffrey A. Lindeman, Reg. # 34,658/

Signature

October 25, 2007

Date

Jeffrey A. Lindeman

Typed or printed name

(202) 585-8000

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of \_\_\_\_\_ forms are submitted.

SEND TO: Commissioner for Patents  
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